



REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/806,730
Filing Date	March 22, 2004
First Named Inventor	Yi-Lung Kuo
Group Art Unit	2841
Examiner Name	Dameon E. Levi
Attorney Docket Number	23724-07787

RC GET 7/20

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-entitled application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. SUBMISSION REQUIRED UNDER 37 C.F.R. § 1.114

- a. Previously submitted
 - i. Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____ (Any unentered amendment(s) referred to above will be entered).
 - ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 - iii. Other _____
- b. Enclosed
 - i. Amendment/Reply
 - ii. Affidavit(s)/Declaration(s)
 - iii. Information Disclosure Statement (IDS)
 - iv. Other _____

2. Miscellaneous

- a. Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
- b. Return Postcard
- c. Other: Figures 2 (Replacement Sheet)

3. Fees

- a. The Director is hereby authorized to charge any required fees, or credit any overpayments, to Deposit Account No. 19-2555
- Fee Transmittal Enclosed (in duplicate)
- Check in the amount of \$ 395.00 is enclosed for the RCE

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Robert A. Hulse	Registration No. (Attorney/Agent)	48,473
Signature		Date	January 5, 2006

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence, including any enclosures identified above, is being transmitted via facsimile on the date shown below to: Mail Stop RCE, Commissioner for Patents, at the facsimile number of (571) 273-8300.

Name (Print/Type)	Robert A. Hulse	Registration No. (Attorney/Agent)	48,473
Signature		Date	January 5, 2006
Express Mail No.			

FEET TRANSMITTAL for FY 2005		<i>Complete if Known</i>	
<small>JAN 09 2006</small>		Application Number	10/806,730
<small>g</small>		Filing Date	March 22, 2004
<small>for</small>		First Named Inventor	Yi-Lung Kuo
<small>Patent fees are subject to annual revision.</small>		Examiner Name	Dameon E. Levi
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2841
TOTAL AMOUNT OF PAYMENT (\$) 395.00		Attorney Docket No. 23724-07787	
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account:		3. ADDITIONAL FEES	
Deposit Account Number 19-2555 Deposit Account Name Fenwick & West LLP		Large Entity Small Entity Fee Description Fee Paid	
The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
FEE CALCULATION		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
1. BASIC FILING FEE		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
Large Entity Small Entity		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
Fee Code (\$) Fee Code (\$) Fee Description Fee Paid		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
SUBTOTAL (1) (\$)		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
Total Claims 11 -20**=0 x = (\$) Independent Claims 2 -3**=0 x = (\$) Multiple Dependent		Extra Claims Fee from below Fee Paid Fee from below Fee Paid	
Large Entity Small Entity		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
Fee Code (\$) Fee Code (\$) Fee Description Fee Paid		Fee Code (\$) Fee Code (\$) Fee Description Fee Paid	
1202 50 2202 25 Claims in excess of 20		1806 180 1806 180 Submission of Information Disclosure Stmt	
1201 200 2201 100 Independent claims in excess of 3		8021 40 8021 40 Recording each patent assignment per property (times number of properties)	
1203 360 2203 180 Multiple dependent claim, if not paid		1809 790 2809 395 Filing a submission after final rejection (37 CFR 1.129(a))	
1204 200 2204 100 **Reissue independent claims over original patent		1810 790 2810 395 For each additional invention to be examined (37 CFR 1.129(b))	
1205 50 2205 25 **Reissue claims in excess of 20 and over original patent		1801 790 2801 395 Request for Continued Examination (RCE)	
SUBTOTAL (2) (\$) 0		1802 900 1802 900 Request for expedited examination of a design application	
<small>**or number previously paid, if greater; For Reissues, see above</small>		SUBTOTAL (3) (\$) 395.00	
<small>*Reduced by Basic Filing Fee Paid</small>			

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Robert A. Hulse	Registration No. (Attorney/Agent)	48,473	Telephone (415) 875-2444	
Signature				Date	January <u>5</u> , 2006